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**TRANSMITTAL FORM**

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	10/690,157
		Filing Date	October 6, 2003
		First Named Inventor	Mark A. Michalicek
		Art Unit	2818
		Examiner Name	Thao P. Le
Total Number of Pages in this Submission	14	Attorney Docket Number	AFD 624

ENCLOSURES (check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts / Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to a Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):		
<table border="1"> <tr> <td>Remarks</td> <td>There is no fee associated with this filing.</td> </tr> </table>			Remarks	There is no fee associated with this filing.
Remarks	There is no fee associated with this filing.			
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT				
Firm or Individual Name	GERALD B. HOLLINS			
Signature	<i>Gerald B Hollins</i>			
Date	14 Feb 2005			

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature

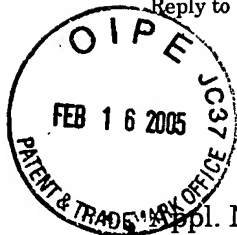
*Gerald B Hollins*

Typed or printed name

GERALD B. HOLLINS

Date

February 14, 2005



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appl. No. : 10/690,157 Confirmation No. : 6036  
Applicant(s) : Mark A. Michalicek  
Filed : October 6, 2003  
TC/AU : 2818  
Examiner : Thao P. Le  
Docket No. : AFD 624  
Customer No. : 26902

Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

**AMENDMENT AFTER EX PARTE QUAYLE ACTION**

Sir:

In response to the Ex Parte Quayle Office Action of December 21, 2004, please amend the above-identified application as follows:

**Amendments to the Specification** begin in page 2 of this paper.

There are no **Amendments to the Claims** in this paper.

**Amendments to the Drawings** begin on page 10 of this paper and include both an attached replacement sheet and an annotated sheet showing changes.

**Remarks/Arguments** begin on page 11 of this paper.

An **Appendix** including amended drawing figures is attached following page 11 of this paper.